



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO. 1035

DATE: July 25, 2011

TO: Iowa Medicaid Case Managers, Targeted Case Managers, and Service Workers

FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Waiver Prior Authorization for Home and Community Based Items \$50.00 and Under

EFFECTIVE: Immediately

The Iowa Medicaid Enterprise began waiver prior authorization of certain Home and Community Based Services (HCBS) effective October 1, 2010. At that time, all Home and Vehicle Modification, Assistive Devices, and Environmental Modification purchases were required to be approved through the waiver prior authorization process, regardless of the cost of the item to be purchased. The department has recently reviewed the current procedure and has determined that it is not productive to continue the full waiver prior authorization process for items costing less than \$50.00.

Effective immediately, a modified prior authorization process will be completed on items costing \$50.00 and under for the procedure codes listed below. The Certificate of Medical Necessity for these codes must be completed as directed below and forwarded to the IME. Multiple items, each costing \$50.00 and under, may be submitted on the same Certificate of Medical Necessity. No longer will bids be submitted with the certificate. The department anticipates that case managers and service workers in their role of facilitating the best services for their members would continue to make sure that the item meets a verified medical need and is the best value for the money spent.

Procedure Code	Code Description	Waiver
W1031	Home and Vehicle Modification	Elderly
W1048	Assistive Devices	Elderly
W1302	Home and Vehicle Modification	Intellectual Disabilities, Money Follows the Person
W1417	Home and Vehicle Modification	Brain Injury, Ill & Handicapped, Physical Disability , Money Follows the Person
W1418	Specialized Medical Equipment	Brain Injury, Physical Disability
W3245	Environmental Modifications, Adaptive Devices, and Therapeutic Resources	Children's Mental Health

The Certificate of Medical Necessity for the codes listed above must be partially completed as described below and then forwarded to the IME through channels already used for the waiver prior authorization process. Only the following fields need to be completed for these items:

Section A

1. Member Name
2. Medicaid SID Number
4. Case Manager Name
6. Case Manager e-mail
7. Case Manager Telephone
8. Name of Item(s) Requested

Section C

12. Justification for request – Provide the cost of the item(s).

The IME review coordinator will approve the milestone in ISIS and the review will be complete if:

- The Certificate of Medical Necessity for Home and Vehicle Modification and/or Assistive Device is submitted to the IME, and
- The Certificate is completed correctly with the requested information needed for Section A and Section C, and
- The item(s) are correctly coded into the service plan. Items that are incorrectly entered into ISIS must be corrected before the item will be approved.

Items that are payable under durable medical equipment (DME) as a regular, non-waiver Medicaid service will be removed from the ISIS service plan.

Senate File 2088 and IAC 441-130.5 give the IME the responsibility and right to review, modify, reduce, and deny any Medicaid service.

The IME appreciates your partnership as we work together to serve the needs of Iowa Medicaid members. If you have any questions, please contact Le Howland at lhowlan@dhs.state.ia.us.

